

<b>COMBINED</b> <b>DECLARATION FOR UTILITY OR DESIGN</b> <b>PATENT APPLICATION (37 CFR 1.63)</b> <b>AND POWER OF ATTORNEY</b>		Attorney Docket Number	9-13528-144US
		First Named Inventor	Christopher THOMPSON
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		<i>Complete if known</i>	
		Application Number	
		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR INITIATING COMMUNICATIONS WITH DISPERSED TEAM MEMBERS FROM WITHIN A VIRTUAL TEAM ENVIRONMENT USING PERSONAL IDENTIFIERS**

the specification of which

☒ is attached hereto.

OR

☐ was filed on \_\_\_\_\_ (mm/dd/yyyy)

as United States Application Number or PCT International Application Number \_\_\_\_\_

and was amended on \_\_\_\_\_ (mm/dd/yyyy) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

COMBINED DECLARATION FOR UTILITY OR DESIGN  
PATENT APPLICATION (37 CFR 1.63) AND POWER OF ATTORNEY

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith:

☒ Customer Number: **020988**  
**SWABEY OGILVY RENAULT**



**020988**  
or Bar Code Label  
PATENT AND TRADEMARK OFFICE

Direct all correspondence to:



**020988**

PATENT AND TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of sole or First Inventor:**

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

**Christopher**

**THOMPSON**

Inventor's Signature

*Chris Thompson*

Date

*Dec 15, 2000*

Residence: City

**Manotick**

State

**Ontario**

Country

**Canada**

Citizenship

**Canadian**

Post Office Address

**5610 Goddard Street**

City

**Manotick**

Province  
or State

**Ontario**

Postal Code  
Or Zip

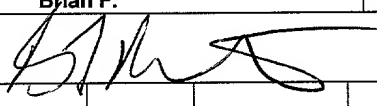
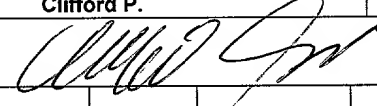
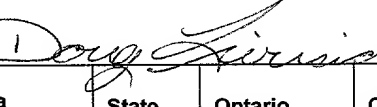
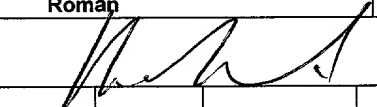
**K4M 1C5**

Country

**Canada**

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) PTO/SB/02A attached hereto.

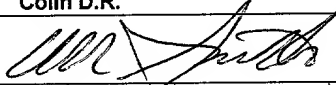
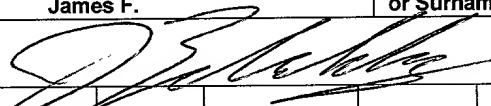

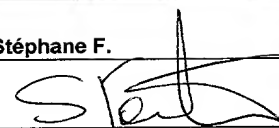
<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Brian F.</b>				Family Name or Surname <b>BEATON</b>			
Inventor's Signature 				Date		2000-12-15	
Residence: City <b>Ottawa</b>		State	<b>Ontario</b>	Country	<b>Canada</b>	Citizenship	<b>Canadian</b>
Mailing Address		<b>65 Spencer Street</b>					
Mailing Address							
City	<b>Ottawa</b>	Province or State	<b>Ontario</b>	Postal Code Or Zip	<b>K1Y 4W8</b>	Country	<b>Canada</b>
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Clifford P.</b>				Family Name or Surname <b>GROSSNER</b>			
Inventor's Signature 				Date		2000/12/15	
Residence: City <b>Nepean</b>		State	<b>Ontario</b>	Country	<b>Canada</b>	Citizenship	<b>Canadian</b>
Mailing Address		<b>11 Stonehedge Park</b>					
Mailing Address							
City	<b>Nepean</b>	Province or State	<b>Ontario</b>	Postal Code Or Zip	<b>K2H 8Z3</b>	Country	<b>Canada</b>
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Douglas E.</b>				Family Name or Surname <b>LIVERSIDGE</b>			
Inventor's Signature 				Date		2000-12-15	
Residence: City <b>Kanata</b>		State	<b>Ontario</b>	Country	<b>Canada</b>	Citizenship	<b>Canadian</b>
Mailing Address		<b>144 Knudson Drive</b>					
Mailing Address							
City	<b>Kanata</b>	Province or State	<b>Ontario</b>	Postal Code Or Zip	<b>K2K 2L8</b>	Country	<b>Canada</b>
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Roman</b>				Family Name or Surname <b>ROMANIUK</b>			
Inventor's Signature 				Date		Dec 15/00	
Residence: City <b>Ottawa</b>		State	<b>Ontario</b>	Country	<b>Canada</b>	Citizenship	<b>Canadian</b>
Mailing Address		<b>120 Aylmer Avenue</b>					
Mailing Address							
City	<b>Ottawa</b>	Province or State	<b>Ontario</b>	Postal Code Or Zip	<b>K1S 2X9</b>	Country	<b>Canada</b>

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231



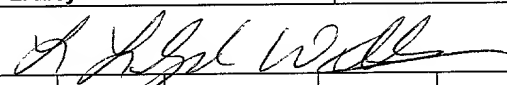
<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> <b>Page 2 of 3</b>
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<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Colin D.R.</b>				Family Name or Surname <b>SMITH</b>			
Inventor's Signature 				Date		<b>2000/12/15</b>	
Residence: City <b>Ottawa</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>			
Mailing Address <b>525 Mansfield Avenue</b>							
Mailing Address							
City <b>Ottawa</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K2A 2S8</b>	Country <b>Canada</b>				
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>James F.</b>				Family Name or Surname <b>ZDRALEK</b>			
Inventor's Signature 				Date		<b>2000-12-15</b>	
Residence: City <b>Ottawa</b>		State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>			
Mailing Address <b>Suite 1509</b>							
Mailing Address <b>475 Elgin Street</b>							
City <b>Ottawa</b>	Province or State <b>Ontario</b>	Postal Code Or Zip <b>K2P 2E6</b>	Country <b>Canada</b>				
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Jean J.</b>				Family Name or Surname <b>BOUCHARD</b>			
Inventor's Signature 				Date		<b>2000-12-12</b>	
Residence: City <b>Sillery</b>		State <b>Quebec</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>			
Mailing Address <b>1280 Rue Oak</b>							
Mailing Address							
City <b>Sillery</b>	Province or State <b>Quebec</b>	Postal Code Or Zip <b>G1T 1Z6</b>	Country <b>Canada</b>				
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Stéphane F.</b>				Family Name or Surname <b>FORTIER</b>			
Inventor's Signature 				Date		<b>2000/12/12</b>	
Residence: City <b>Breakeyville</b>		State <b>Quebec</b>	Country <b>Canada</b>	Citizenship <b>Canadian</b>			
Mailing Address <b>3 Rue de la Pêche</b>							
Mailing Address							
City <b>Breakeyville</b>	Province or State <b>Quebec</b>	Postal Code Or Zip <b>G0S 1E3</b>	Country <b>Canada</b>				

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> <b>Page 3 of 3</b>
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<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name L. Lloyd				Family Name or Surname WILLIAMS			
Inventor's Signature 		Date 15 Dec 2000					
Residence: City Kanata		State Ontario	Country Canada	Citizenship Canadian			
Mailing Address 15 Brodeur Crescent							
Mailing Address							
City Kanata		Province or State Ontario	Postal Code Or Zip K2L 1Z2	Country Canada			
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Family Name or Surname			
Inventor's Signature		Date					
Residence: City		State	Country	Citizenship			
Mailing Address							
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City		Province or State	Postal Code Or Zip	Country			
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Family Name or Surname			
Inventor's Signature		Date					
Residence: City		State	Country	Citizenship			
Mailing Address							
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<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Family Name or Surname			
Inventor's Signature		Date					
Residence: City		State	Country	Citizenship			
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